PTO/SB/17 (10-08)
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known				
						10/574,896-Conf. #3390		
FEE TRANSMITTAL						April 6, 2006		
For FY 2009					Shuji IKEGAMI			
				Examiner Name /		Alexis K. Cox		
Applicant claims small entity status. See 37 CFR 1.2			27	Art Unit	;	3744		
TOTAL AMOUNT OF PAYMENT		(\$) 810.00		Attorney Docket No. 4		4633-0166PUS1		
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
X Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
FEE CALCUL								
	, SEARCH, AND E	KAMINATION FE	ES					
	FILING FEES SEARCH FEES EXAMINATION FEES							
Application Typ	<u>pe</u> Fee (\$	Small Entity	Ean (f	Small Entity	F (\$)	Small Entity	_	.
Utility	330) <u>Fee (\$)</u> 165	Fee (\$	Fee (\$) 270	Fee (\$)	<u>Fee (\$)</u>	Fees	Paid (\$)
Design	220	110			220	110		
Plant	220		100	50	140	70		
Reissue	· · ·	110	330	165	170	85		
Provisional	330	165	540	270	650	325		
	220	110	0	0	0	0		
2. EXCESS CLAIM FEES Fee Description Fee (\$) Fee (\$)								
Food claim over 20 (including Driver)								
Each independent claim over 3 (including Reissues)							52 220	26
Multiple dependent claims							390	110 195
		Fee (\$)	Fee Paid (\$)		84.	ultiple Depende		
			re raiu (\$)		ultiple Depende	ee Paid (-	
HP = highest number	er of total claims paid for,				<u> </u>	<u>e (\$)</u> <u>F</u>	ee raid (<u> 71</u>
Indep. Claims	Extra Claims		Fee Paid (\$)					- <u>-</u>
1	or HP = 0	x =		(1)				
HP = highest numbe	er of independent claims	paid for, if greater that	n 3.					
3. APPLICATION								
listings under	on and drawings extra 37 CFR 1.52(e)), the	he application siz	æ fee due	e is \$270 (\$135 fo	onically file or small en	ed sequence or o	omputer ditional 50	0
	tion thereof. See 35							
Total Sheets	Extra Sheets			Iditional 50 or frac			<u>Fee l</u>	<u>Paid (\$)</u>
	- 100 =	/50 =		(round up to a whol	e number) x	<u> </u>	-	
4. OTHER FEE(S) Non-English Specification \$120 for (no recall parties like and)								
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 810.00								
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SUBMITTED BY	- } 	/ /		Pogistration No.				
Signature	NA X			Registration No. (Attorney/Agent) 40,439 Telephone (703) 205-8035			5-8035	
Name (Print/Type)	ame (Print/Type) D. Richard Anderson Date August 25, 20							5, 2009